

TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

		Application Number	09/781,610
		Filing Date	February 12, 2001
		Confirmation Number	3883
		Inventor(s)	DENYER et al.
		Group Art Unit	3731
		Examiner	Mendoza, M.
Total Number of Pages in This Submission:	2	Attorney Docket No.	00-41 RCE

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (submit in duplicate)	<input type="checkbox"/> Assignment Papers	<input type="checkbox"/> Issue fee Transmittal Form PTO-85(b) + (c) and cover sheet
<input type="checkbox"/> Fee Attached \$ _____	<input type="checkbox"/> Cover Sheet	<input type="checkbox"/> After Allowance Communication to Group
Check No.: _____	<input type="checkbox"/> Drawing Change Authorization Request and Amended Figure(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Request for Return of PTO-1449 Forms	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to the Commissioner	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits / Declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input checked="" type="checkbox"/> Status Request Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Address	<input type="checkbox"/> Small Entity Statement
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer(s)	<input type="checkbox"/> Request for Refund
<input type="checkbox"/> Form PTO-1449	<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Response to Missing Parts / Incomplete Application
<input type="checkbox"/> Cited References	<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> Response to File Corrected Application Papers
<input type="checkbox"/> Search report		
<input type="checkbox"/> Drawing(s): Number of Pages _____	<input type="checkbox"/> Other Enclosure(s): _____	
Number of Figs. _____ and cover sheet		
<input type="checkbox"/> Formal		
<input type="checkbox"/> Informal		

Current Due Date: None

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual and Company	Timothy Nathan, Reg. No. 44,256 RESPIRONICS, Inc., 1010 Murry Ridge Lane, Murrysville PA, 15668
Signature	
Date	March 8, 2006

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all enclosures are being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Commissioner for Patents, P.O. Box 1450, Alexandria, VA, 22313-1450 on this date: March 8, 2006.

Typed Name	Timothy Nathan, Reg. No. 44,256		
Signature		Date	March 8, 2006



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT APPLICATION of

Inventor : DENYER et al.
Appln. No. : 09/781,610
Conf. No.: : 3883
Filed: : February 12, 2001
Title: : CONTROLLING DRUG DELIVERY APPARATUS
Group Art Unit : 3731
Examiner : Mendoza, M.
Docket No. : 00-41 RCE

* * * *

March 8, 2006

STATUS REQUEST

Hon. Commissioner of Patents
and Trademarks
Washington, D.C. 20231

Sir:

Applicant respectfully requests an update as to the status of the above-identified pending application. According to our records, no action on the merits has been issued.

Please promptly direct a response to this request to the undersigned, either by telephone, facsimile, or mail, at your earliest convenience.

Respectfully submitted,

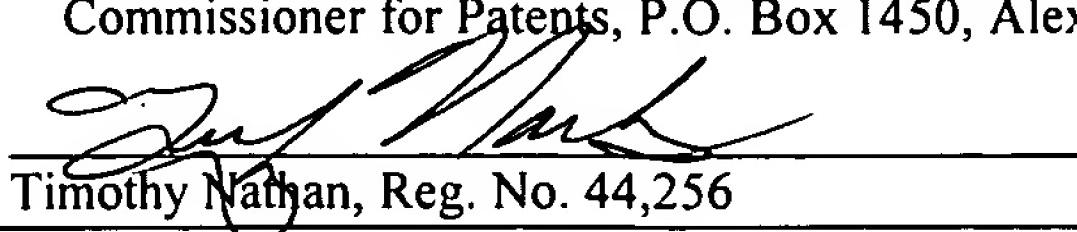
By


Timothy Nathan
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Tel. No.: (724) 387-4435
Fax No.: (724) 387-5021

RESPIRONICS INC.
1010 Murry Ridge Lane
Murrysville, PA 15668-8525

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8(a)

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Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Timothy Nathan, Reg. No. 44,256